

# COPY

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Do Not Write Above This Line—For Headquarters Office Only

**APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)**

To: Department of Alcoholic Beverage Control  
1901 Broadway  
Sacramento, Calif. 95818 Stockton  
(DISTRICT SERVING LOCATION)

The undersigned hereby applies for  
licenses described as follows:

**1. TYPE(S) OF LICENSE(S)**

On Sale Beer and Wine  
Eating Place

**FILE NO.****RECEIPT NO.**

113645  
GEOGRAPHICAL  
CODE 3902

**Date**

Temp. Permit

Temp. Permit

**2. NAME(S) OF APPLICANT(S)**

MAK, Miu Wah Ping & Yiu Hung

Applied under Sec. 24044 ☐Effective Date: Issuance

Effective Date: \*

**3 TYPE(S) OF TRANSACTION(S)****FEE****LK  
TYPE**

ORIGINAL

\$ 300.00

41

Annual Fee

197.00

**4. Name of Business**

Lucky House

**5. Location of Business—Number and Street**

550 S. Cherokee Lane, Ste H

City and Zip Code

Lodi 95240

County

San Joaquin

TOTAL

\$ 497.00

**6. If Premises Licensed,  
Show Type of License**

41

**7. Are Premises Inside  
City Limits?**

Yes

**8. Mailing Address (if different from 5)—Number and Street**

Same

Perma

(Temp) (Perm)

**9. Have you ever been convicted of a felony?**

No

**10. Have you ever violated any of the provisions of the Alcoholic  
Beverage Control Act or regulations of the Department per-  
taining to the Act?**

No

11. Explain a "YES" answer to items 9 or 10 on an attachment which shall be deemed part of this application.

12. Applicant agrees (a) that any manager employed in on-sale licensed premises will have all the qualifications of a licensee, and  
(b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.

**13. STATE OF CALIFORNIA**County of San JoaquinDate 7-28-88

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing application and knows the contents thereof and that each and all of the statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant's or applicants' business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor of transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

**14. APPLICANT  
SIGN HERE****APPLICATION BY TRANSFEROR****15. STATE OF CALIFORNIA**

County of \_\_\_\_\_ Date \_\_\_\_\_

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the licensee, or an executive officer of the corporate licensee, named in the foregoing transfer application, duly authorized to make this transfer application on its behalf; (2) that he hereby makes application to surrender all interest in the attached license(s) described below and to transfer same to the applicant and/or location indicated on the upper portion of this application form, if such transfer is approved by the Director; (3) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor of transferor or to defraud or injure any creditor of transferor; (4) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

**16. Name(s) of Licensee(s)****17. Signature(s) of Licensee(s)****18. License Number(s)****19. Location**

Number and Street

City and Zip Code

County

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Attached: ☐ Recorded notice,  
☐ Fiduciary papers,  
☐ \_\_\_\_\_  
(OTHER)

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7-29-88☐ Renewal Fee of \_\_\_\_\_ Paid at \_\_\_\_\_

Office on \_\_\_\_\_ Receipt No. \_\_\_\_\_

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**APPLICATION FOR ALCOHOLIC BEVERAGE LICENSE(S)**

To: Department of Alcoholic Beverage Control  
1901 Broadway  
Sacramento, Calif. 95813 Stockton  
(DISTRICT SERVING LOCATION)

The undersigned hereby applies for  
licenses described as follows:

**2. NAME(S) OF APPLICANT(S)**

LODI SPORTS CORPORATION, INC.

**1. TYPE(S) OF LICENSE(S)**

On Sale General  
Public Premises

Applied under Sec. 24044 ☐  
Effective Date: Issuance

**FILE NO.****RECEIPT NO.**

413733  
GEOGRAPHICAL  
CODE 3902

Date  
Issued

Temp. Permit

Effective Date:

**3. TYPE(S) OF TRANSACTION(S)****FEE****LIC.  
TYPE**

Per to Per

\$ 1,250.00

48

**4. Name of Business**

Lodi Sport Club

**5. Location of Business—Number and Street**

114 N. Sacramento Street

City and Zip Code  
Lodi, 95240

County  
San Joaquin

TOTAL \$ 1,250.00

**6. If Premises Licensed,  
Show Type of License**

48

**7. Are Premises Inside  
City Limits? Yes**

(Temp) (Perm)

**8. Mailing Address (if different from 5)—Number and Street**

Same

**9. Have you ever been convicted of a felony?****10. Have you ever violated any of the provisions of the Alcoholic  
Beverage Control Act or regulations of the Department per-  
taining to the Act?**

No

**11. Explain a "YES" answer to items 9 or 10 on an attachment which shall be deemed part of this application.****12. Applicant agrees (a) that any manager employed in on-sale licensed premises will have all the qualifications of a licensee, and  
(b) that he will not violate or cause or permit to be violated any of the provisions of the Alcoholic Beverage Control Act.****13. STATE OF CALIFORNIA**

County of San Joaquin Date 8-5-88

Under penalty of perjury, each person whose signature appears below, certifies and says: (1) He is the applicant, or one of the applicants, or an executive officer of the applicant corporation, named in the foregoing application, duly authorized to make this application on its behalf; (2) that he has read the foregoing application and knows the contents thereof and that each and all of the statements therein made are true; (3) that no person other than the applicant or applicants has any direct or indirect interest in the applicant's or applicants' business to be conducted under the license(s) for which this application is made; (4) that the transfer application or proposed transfer is not made to satisfy the payment of a loan or to fulfill an agreement entered into more than ninety (90) days preceding the day on which the transfer application is filed with the Department or to gain or establish a preference to or for any creditor of transferor or to defraud or injure any creditor of transferor; (5) that the transfer application may be withdrawn by either the applicant or the licensee with no resulting liability to the Department.

**14. APPLICANT  
SIGN HERE**

Donald H. Anderson  
President

**APPLICATION BY TRANSFEROR****15. STATE OF CALIFORNIA**

County of San Joaquin Date 8-5-88

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**16. Name(s) of Licensee(s)****17. Signature(s) of Licensee(s)****18. License Number(s)**

Erwin Schmidt

48-150405

**19. Location****Number and Street****City and Zip Code****County**

Same Location

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☐

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